

POSITION	ID NO.	DATE
CLASSIFIER	7	8-1-96
EXAMINER	49	10-10-96
TYPIST	10-11	10/10
VERIFIER		
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

### INDEX OF CLAIMS

Claim	Date
1	11/19/96
2	11/19/96
3	11/19/96
4	11/19/96
5	11/19/96
6	11/19/96
7	11/19/96
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SYMBOLS

- ✓ ..... Rejected
- ..... Allowed
- (Through numerical) ..... Cancelled
- ..... Restricted
- N ..... Non-elected
- I ..... Interference
- A ..... Appeal
- D ..... Objected

(LEFT INSIDE)